

COVID-19 [Outbreak Response Method](#) in Long-term Care Facilities (LTCFs)

Scenario	Work Exclusion or Isolation Recommendations	Testing Recommendations	Quarantine Recommendations if Exposed
Identification of healthcare personnel (HCP) with a positive test for SARS-CoV-2 - up to date [^] with COVID-19 vaccination	Exclude from work ; duration varies based on staffing capacity	<ul style="list-style-type: none"> - If able to identify close contacts[†]: test all close contacts immediately (but not sooner than 24 hours after exposure) and if negative, again 5-7 days after exposure. - If unable to identify close contacts[†]: broad-based testing approach (unit-wide or facility-wide). Test immediately (but not sooner than 24 hours after exposure, if known) and if negative, again 5-7 days after. 	Unless they develop symptoms of COVID-19, OR are diagnosed with SARS-CoV-2 infection, exposed HCP who are up to date with COVID-19 vaccination OR who have had SARS-CoV-2 infection in the past 90 days can continue to work ^{**} but should wear source control for 10 days following the exposure. Test immediately (but not earlier than 24 hours after exposure) and, if negative, on day 5-7 (day of exposure is day 0).
Identification of HCP with a positive test for SARS-CoV-2 - not up to date with COVID-19 vaccination	Exclude from work ; duration varies based on staffing capacity	<ul style="list-style-type: none"> - If no new cases are identified: ongoing testing is not required beyond the initial series of 2 viral tests. 	Exposed HCP who are not up to date with COVID-19 vaccination should be excluded from work for 10 days OR 7 days with a negative viral test (collected and tested within 48 hrs before the time of planned return to work).
Identification of a resident with a positive test for SARS-CoV-2 - up to date [^] with COVID-19 vaccination	Move to COVID-19 unit	<ul style="list-style-type: none"> - If new cases are identified: continue testing every 3-7 days until 14 days with no new cases^{**}. If using antigen tests, more frequent testing (every 3 days) should be considered. 	Unless they develop symptoms of COVID-19, OR are diagnosed with SARS-CoV-2 infection, exposed LTCF residents who are up to date with COVID-19 vaccination or who have had SARS-CoV-2 infection in the past 90 days do not have to quarantine ^{**} but should wear source control for 10 days following the exposure.
Identification of a resident with a positive test for SARS-CoV-2 - not up to date with COVID-19 vaccination	Move to COVID-19 unit		Exposed LTCF residents who are not up to date with COVID-19 vaccination should quarantine for 10 days OR 7 days with a negative viral test (collected and tested within 48 hrs before the time of planned discontinuation of quarantine).

CDC continually updates guidance and recommendations may change accordingly.

Additional information is available in CDC's [Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease \(COVID-19\) Pandemic](#), and [Interim Infection Prevention and Control Recommendations to Prevent SARS-CoV-2 Spread in Nursing Homes](#)

[^]Being [up to date](#) means a person has received all recommended COVID-19 vaccines, including any booster dose(s) when eligible.

[†][Close contacts](#) include any residents, visitors, or staff who were within 6 feet of the positive individual for a total of at least 15 minutes over a 24-hour period. People with COVID-19 can pass the SARS-CoV-2 virus to their close contacts starting from 2 days before they become sick (or 2 days before they

test positive if they never had symptoms) until it is [safe to be around other people \(stop isolation\)](#).

** In addition to [room restriction](#) and full PPE use for care of LTCF residents who are not up to date with COVID-19 vaccination

^^Exceptions applicable to up to date HCP/LTCF residents:

1- Who are moderately to severely immunocompromised OR

2- When directed by public health authorities (e.g., during an outbreak where SARS-CoV-2 infections are identified among up to date HCPs/residents)
OR

3- In the event of ongoing transmission within a facility that is not controlled with initial interventions, strong consideration should be given to use of work restriction of up to date HCP with higher-risk exposures and quarantine of up to date residents with prolonged close contact with someone with SARS-CoV-2 infection.